04-06-06 PART B - FEE(S) TRANSMITTAL Mail Stop ISSUE FEE Complete and seachthis form, together with applicable fee(s), to: Mail Commissioner for Patents APR 0 4 2006 P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571) 273-2885 INSTACTION FEE (if required). Blocks 1 through 5 should be completed where appropriate All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 27353 7590 01/13/2006 MELVIN K. SILVERMAN Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. 500 WEST CYPRESS CREEK ROAD **SUITE 500** FT. LAUDERDALE, FL 33309 04/07/2006 RMEBRAH1 00000016 10659781 <u>Silverman</u> (Signature 700.00 DP 01 FC:2501 (Date 300.00 OP 02 FC:1504 FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO CONFIRMATION NO. APPLICATION NO. 09/08/2003 Lakdas Nanayakkara 1070.16.2 5617 10/659.781 TITLE OF INVENTION: METAL STUD FRAME ELEMENT CONSTRUCTION PANEL APPLN. TYPE SMALL ENTITY **ISSUE FEE PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE \$1000 04/13/2006 YES \$700 \$300 nonprovisional **EXAMINER** ART UNIT CLASS-SUBCLASS KATCHEVES, BASIL S 3635 052-481100 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list _ıMelvin K. Silverman (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

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